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CONFIRMATION NO. 2397

<b>SERIAL NUMBER</b> 10/511,438	<b>FILING OR 371(c) DATE</b> 06/10/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1615	<b>ATTORNEY DOCKET NO.</b> 260005US0PCT
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## APPLICANTS

Pascale Gaillard, St Julien-en-Genevois, FRANCE;  
 Jean-Pierre Gotteland, Beaumont, FRANCE;  
 Pierre-Alain Vitte, Cranves-Sales, FRANCE;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/EP03/04323 04/25/2003  
*DR*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

EUROPEAN PATENT OFFICE (EPO) 02100417.1 04/25/2002  
*DR*

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>DR</i>	STATE OR COUNTRY FRANCE	SHEETS DRAWING	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 1
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## ADDRESS

22850

## TITLE

Piperazine benzothiazoles as agents for the treatment of cerebral ischemic disorders or cns disorders

<b>FILING FEE RECEIVED</b> 1080	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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